Morse Beach Softball

2009 Fall Team Registration

\$370 per team

Existing team registration: July 13 - July 22 (All teams who participated in Fall of 08 and Spring of 09)

All other teams: July 23 - July 31

Contact Informat	ion:			- Marie - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	
Coach's Name:		Team Name:			
Coach's Address:		City:	State	e:Zip:	
Phone:		E-mail:			
Do you want a receipt n	nade out to anyone in pa	rticular? If so please pro	vide the details below:		
Name/Business Name:			-		
Address:		City:	Stat	e:Zip:	
League Preference	ce:				
Monday CoEd Upper League (6-teams) CoEd Recreational League (6-teams)	Tuesday □ CoEd Recreational League (6-teams) □ Men's Recreational League (6-teams)	Wednesday □ Men's Lower Division (6 teams) □ Men's Recreational League (6 teams) n's Lower: formerly D M	Thursday □ Men's Upper League (6 teams) □ Men's Recreational League (6 teams) ####################################	Division (12 teams)	
We hereby apply for ad as rules set forth by the to be governed by these	Hamilton County Parks	gue and acknowledge th and Recreation Departm	at all play will be governe ent. We hereby acknowle	ed by ASA rules, as well edge receipt and agree	
Coaches Signature:			Date	Date:	
The fee, which includes	s ASA dues of \$20, must	be submitted with your a	pplication at the parks ad	ministration office.	
Mailing Address: 15513 South Union Street Carmel, IN 46033					
In-person delivery: The office is located 2 miles south of Westfield on Union Street.					
Check or money orders must be made out to: Hamilton County Parks and Recreation Department					
All personal checks must include the social security number or the driver's license number of the person's name on the check.					
A mandatory coaches r Schedules will be hand	meeting will be held Augu ed out at the coaches me	ist 3, 2009 – 7PM at the e eeting and posted on the	Osprey Pointe Pavilion (lowebsite at www.morsebe	ocated at Morse Beach). eachsoftball.org.	
Official Use Only	1				
Check Number:	Receipt Number:				